

# CANCELLATION OF REGISTRATION FOREIGN STATUTORY TRUST

Office of the Secretary of the State  
30 Trinity Street / P.O. Box 150470 / Hartford, CT 06115-0470 / Rev. 03/01/2001

Space For Office Use Only

**Filing Fee: \$60.00**

**1. NAME OF STATUTORY TRUST IN ITS STATE OR COUNTRY OF FORMATION:**

**2. IF DIFFERENT FROM THE ABOVE, THE NAME UNDER WHICH STATUTORY TRUST TRANSACTS BUSINESS IN CONNECTICUT:**

**3. STATE OR COUNTRY OF FORMATION:**

**The statutory trust is not transacting business in Connecticut and surrenders its authority to transact further business therein.**

**The statutory trust further revokes the authority of its registered agent to accept service of process on its behalf.**

**The statutory trust appoints the Secretary of the State as its agent for service of process and consents to service of process thereon in any action, suit or proceeding based on a cause of action arising during the time it was authorized to transact business in this state.**

**4. THE ADDRESS TO WHICH THE SECRETARY OF THE STATE MAY MAIL ANY PROCESS SERVED UPON HIM IN ACCORDANCE WITH THE ABOVE STATED APPOINTMENT:**

\_\_\_\_\_  
(Number and street or P.O. Box)

\_\_\_\_\_  
(City, State and Zip Code)

## **5. EXECUTION**

**Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.**

|  |                              |                  |
|--|------------------------------|------------------|
|  |                              |                  |
| <b>Print or type name of signatory</b> | <b>Capacity of signatory</b> | <b>Signature</b> |